Coding Guidelines for Operations and Procedures

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UHDDS Reporting Procedures

- UHDDS requires all significant procedures to be reported
- Medicare requires the reporting of any procedure that affects payment, whether or not it meets the definition of significant procedure.

Volume III

- **Significant Procedure defined as one that meets following condition:**
  - Surgical in nature
    - Incision, excision, destruction, amputation, introduction, insertion, endoscopies, repair, suturing, and manipulation.
  - Carries anesthetic risk
    - Any procedure performed under anesthesia other than topical carries an anesthetic risk.

Surgery

- Carries procedural risk
  - Recognized risk of inducing functional impairment, physiologic disturbance, or possible disturbance during invasive procedure.
- Requires specialized training
  - Procedures requiring specialized training, and performed by specialized professionals, qualified technicians, or clinical teams specifically trained to perform certain procedures or whose services are directed primarily to carrying them out.

Medicare Reporting

- Surgeon who performs the procedure must be identified by a unique number within the hospital
- Date of procedure must be reported
- Uniform bill provides space for six procedures (if more than six all therapeutic procedures, especially those related to the principal diagnoses, should be reported to the extent possible)

Procedure Codes

- ICD-9-CM codes used when reporting surgery and procedures for inpatients
- Most third-party payers, including Medicare, use CPT and HCPC level II codes for reporting outpatient procedures
- Many hospitals use ICD-9-CM to code outpatient procedures for internal use

Principal Procedure

- One performed for definitive treatment (instead of diagnostic or exploratory purposes) or one that is necessary to care for a complication.
- If two or more procedures meet criteria, the one most closely related to the principle dx is designated as the principal proc.

Principal Procedure cont'd

- If both are equally related to the the principle dx, the most resource-intensive or complex procedure should be identified as principle.
- When more than one procedure is reported, the principal procedure should be identified by the one that relates to the principal dx.

Format and Organization

- Contain Alphabetic and Tabular List
- Most chapters deal with specific body system

- Four exceptions are:
- Chapter 00

- Chapter 13

- Chapter 16

- Chapter 17

Format and Organization cont'd

- Chapter 00 and 17 created to capture diverse group of procedures and interventions affecting all body systems (i.e. new technology).
- Chapter 13 classifies obstetrical procedures
- Chapter 16 classifies diagnostic and therapeutic procedures not generally considered to be surgical in nature

Code Also

- Used to indicate an additional code should be assigned if the referenced procedure was performed. Two specific situations:
  - To advise coder that individual components of a procedure, or two procedures that might be considered as a unit, must be coded; expressed as code also any synchonronous….
    - Example:
    - 13.1 Intracapsular extraction of lens
    - Code also any synchronous insertion of pseudophakos (13.71)

Code Also cont'd

- To advise the coder that an additional code is to be assigned when certain adjunct procedures are performed, or certain equipment is used. Often found at the beginning of a category or subcategory and applies to all subdivisions.
  - Example:
    - 35.3Operations on structures adjacent to heart valves
    - Code also cardiopulmonary bypass (extra corporeal circulation) (heart-lung machine) (39.61)

Locating Procedure Terms

- Look up main terms in Alphabetic Index
  - Example: incision, excision, graft, implant, etc.
- Eponyms – the name of the surgeon(s) who developed the procedure.
- Indexed in three ways:
  - Eponym itself
  - Main term operation
  - Main term or subterm(s) that describe the operation

Locating Procedure Terms cont'd

- Excision of Organ or Lesion
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  - Removal of an organ is usually listed by site under the main terms
  - When only a lesion is removed check the main term excision, the subterm lesion, or the more specific subterm that indicates the site.

Bilateral Procedures

- Some codes distinguish between bilateral and unilateral procedures
- This is not true for certain major procedures such as joint replacements
- Represents significant use of resources
- Codes assigned twice

Coding Operative Approaches

- Operative approach ordinarily considered an integral part of the procedure and no code is assigned

- Exceptions are:
  - Code for surgery does not imply the approach
  - Opening in body cavity is followed by a diagnostic procedure such as biopsy

Laparascopic and Thorascopic Approaches

- Used for a number of procedures
- Permits removal of tissue or organs under videoscopic guidance through very small incision
- Less invasive than open surgery
- Less trauma to patient
- Earlier discharge from hospital
- More rapid recovery

Laparascopic and Thorascopic Approaches cont'd

- Not always successful
- Sometimes necessary to convert to open procedure
- No code is assigned for laparoscopic or thorascopic approach
- Code V64.4 – Laparoscopic surgical procedure converted to open procedure assigned as additional diagnosis

Other Endoscopic Approaches

- Coded, unless Alphabetic Index directs otherwise or code title indicates that the procedure was performed by endoscopy
- When passed through more than on body cavity, the code for the endoscopy identifies the most distant site (i.e. EGD – other endoscopy of small intestine)

Biopsies

- A biopsy is the taking of tissue from a living person for the purpose of microscopic study.
- Biopsy code not assigned when a lesion is removed for therapeutic purposes and sent to a lab for examination
- Closed bx – bx performed percutaneously by needle, brush, aspiration, or endoscopy.
- Aspiration bx – collects cells for examination by aspiration; included in code for closed bx

Biopsies cont'd

- Open Biopsy – bx performed by ay of an incision, the incision is implicit in the bx code (when the approach is implied no additional code for the incision is required)

- When a bx is incidental to the removal of other tissue during a procedure, both the procedure and the bx are coded, with the more definitive procedure sequenced first.

Biopsies cont'd

- Needle Biopsy – bx for the removal of a small sample of tissue performed during an open surgical procedure.
- Coded as a closed bx even though the body cavity was opened.
- The type of bx is determined the technique used to obtain tissue for study;

Biopsies cont’d

- The terms open and closed in this connection do not refer to the surgical approach used to obtain access to an internal organ
- The code for the definitive procedure is sequenced first, with an additional code the needle biopsy.

Biopsies cont'd

- Occasionally, a bx is performed immediately before the procedure is begun.
- Permits the pathologists to perform a rapid-frozen section examination for malignancy (for modifications)
- The bx is then followed by a more definitive surgery during the same operative episode.
- Both bx code and code for therapeutic procedure code is assigned, with the therapeutic code sequenced first.

Diagnosis-Related Procedures

- Certain procedures are performed only for very specific conditions; in these cases, care should be taken that the associated diagnosis code is also assigned.
  - Example:
    - Procedure: Repair of retinal detachment
    - Diagnosis: Retinal detachment

Cancelled Procedures

- No procedure code is assigned
- Code from V64 – persons encountering health services for specific procedures not carried out
- Cannot be assigned as principal diagnosis

Cancelled Procedures cont'd

- Planned surgery may be cancelled for one of the following reasons:
  - Contraindications to he patient: V64.1
  - Patient changed mind: V64.2
  - Problems in scheduling: V64.3

Coding Incomplete Procedures

- Except for obstetrical procedure of failed forceps (73.3), the procedure classification makes no provision for indicating a procedure has not been completed.
- When a planned procedure is begun but cannot be completed, it is coded to the extent to which it was actually performed according to the following principles:

Coding Incomplete Procedures cont'd

- V64.0 – Vaccination not carried out because of contraindication
- V64.1 – Surgical or other procedure not carried out because of contraindication
- V64.2 – Surgical or other procedure not carried out because of patient decision
- V64.3 – Surgical or other procedure not carried out because of other reason

Coding Stent Insertions

- Intravascular stent stents are tubular metal implants designed to restore blood flow by reopening or enlarging a blood vessel and maintaining patency.
- Valuable in treating threatened or abrupt vessel closure, thus reducing the need for emergency surgery
- Drug-eluting stents – new type of stent created to address common problem of vessel restenosis post stent insertion.

Coding Stent Insertions cont'd

- Drug-eluting stents –releases active drug in controlled manner.
- Care taken to document right type of stent
  - Conventional stent, drug covered, etc.
- Coronary angioplasty performed by any technique is inherent in the placement of a coronary stent
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Shunt Procedures

- Often identified by name of device (Denver, LeVeen, etc.)
- Used for a variety of purposes
- Codes assigned for a variety of purposes
- Assigned on the basis of the therapeutic intent and procedure involved rather than on the name of the shunt
- Codes found in the index under the main terms creation, formation, or shunt

Stereotactic Radiosurgery

- Performed as treatment for brain lesions and tumors
- Used for treating arteriovenous malformations
- Treatment of functional disorders such as Parkinson’s Disease, epilepsy, and intractable pain

Stereotactic Radiosurgery cont'd

- Indications for treatment using this technique:
  - Lesions inaccessible to open surgery
  - Medical contraindications for open surgery
  - Elderly or very young patients
  - Recurrent lesions after open surgery
  - Radiation therapy